



<b>Voluntary Petition</b> (This page must be completed and filed in every case)		Name of Debtor(s):	
<b>All Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet.)</b>			
Location Where Filed: CUYAHOGA COUNTY	Case Number: 05 04747	Date Filed: MARCH 2005	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)</b>			
Name of Debtor: NONE		Case Number:	Date Filed:
District:	Relationship:	Judge:	
<b>Exhibit A</b>  (To be completed if debtor is required to file periodic reports (e.g., for 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b>  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).  <div style="display: flex; justify-content: space-between;"> <span>X _____</span> <span>_____</span> </div> <div style="display: flex; justify-content: space-between;"> <span>Signature of Attorney</span> <span>Date</span> </div>	
<b>Exhibit C</b>  Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b>  (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> (Check any applicable box.)  <input checked="" type="checkbox"/> Debtor has been domiciled or has had its principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer period such as _____ days than in any other District.  <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> (Check all applicable boxes.)  <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <div style="margin-left: 100px;">         _____          (Name of landlord that obtained judgment)       </div> <div style="margin-left: 100px;">         _____          (Address of landlord)       </div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgement for possession was entered, and  <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.  <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).			

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**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN District of OHIO**

In Re: \_\_\_\_\_  
 Debtor

Case No. 7  
 (if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
 CREDIT COUNSELING REQUIREMENT**

DEMO

**Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.**

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.

☐ 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

DEMO

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

**If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.**

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.][Must be accompanied by a motion for determination by the court.]

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor /S/ JAZZMA DICKINSON

Date: \_\_\_\_\_

**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN District of OHIO**

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

**Debtor**

(if known)

Chapter \_\_\_\_\_ 7 \_\_\_\_\_

# DEMO

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	5	0.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1		0.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			
J - Current Expenditures of Individual Debtor(s)	Yes	1			2,383.00
TOTAL		15	0.00	0.00	

**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN District of OHIO**

In Re: \_\_\_\_\_ Case No. \_\_\_\_\_ 7  
 Debtor (if known)  
 Chapter \_\_\_\_\_ 7

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)(whether disputed or undisputed)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)(whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
<b>TOTAL</b>	

**State the following:**

Average Income (from Schedule I, Line 12)	1,864.00
Average Expenses (from Schedule J, Line 22)	2,383.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" COLUMN		
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.		
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column.		
4. Total from Schedule F		\$195,435.52
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$195,435.52

In Re: \_\_\_\_\_

**Debtor**

Case No. \_\_\_\_\_

7

(if known)

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint or Community". If the debtor holds no interest in real property, write "None" under "Description and Location of Property".

**Do not include interests in executory contracts or unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim (see Schedule D). If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim".

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption	Amount of Secured Claim
NONE				
<b>DEMO</b>				
Total				\$0.00



In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

Debtor

(if known)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attach a separate sheet properly identified with the same case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint or Community". If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state the person's name and address under "Description and Location of Property".

If the property is being held for a minor child, only state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
1. Cash on hand.				100.00
2. Checking, savings or other financial accounts, CD's, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.		LANDLORD 27361 SIDNEY DR. #18 EUCLID, OHIO 44132		500.00
4. Household goods and furnishings, including audio, video, and computer equipment.		27361 SIDNEY DR. #18 EUCLID, OHIO 44132		1,000.00

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

**Debtor**

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.				
6. Wearing apparel.		27361 SIDNEY DR. #18 EUCLID, OH 44132		350.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars.	X			
12. Interest in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7

**Debtor**

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
13. Stock and interests in incorporated and unincorporated businesses. Itemize.				
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.				
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in real estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7

**Debtor**

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
21. Other contingent or unliquidated claims of every nature, including tax refunds, court claims of the debtor, and rights to setoff claims. Give estimated value of each.				
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

**Debtor**

(if known)

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
Total				

Case No. 7

**Debtor**

(if known)

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675.\*

□ 11 U.S.C. § 522(b)(2)

☒ 11 U.S.C. § 522(b)(3)

DEMO			
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
			100.00
LANDLORD 27361 SIDNEY DR. #18 EUCLID, OHIO 44132			500.00
27361 SIDNEY DR. #18 EUCLID, OHIO 44132			1,000.00
27361 SIDNEY DR. #18 EUCLID, OH 44132			350.00
DEMO			

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

Debtor

(if known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not appear on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors and complete Schedule C - Codebtor. If a joint claim is listed, state whether husband, wife, both of them, or the marital community may be liable on such claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including Zip Code	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred, Nature of Lien, and Description and Value of Property Subject to Lien	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account Number:	Ind	VALUE \$		X			0
Account Number:	Ind	VALUE \$		X		1	0
Account Number:		VALUE \$					
Account Number:		VALUE \$					
Subtotal (Total of this page)							
Total (Use only on last page)							

(Report also on  
Summary of  
Schedules.)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

0 continuation sheets attached

In Re: \_\_\_\_\_

Debtor

Case No. \_\_\_\_\_

(if known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of this petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. 11 U.S.C. § 1123(a); Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule E Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or governmental unit, to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an insular case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).



In Re: \_\_\_\_\_

Debtor

Case No. \_\_\_\_\_

7  
(if known)☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per family of fishermen, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* deposited for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTR, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 04/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

# DEMO

0 continuation sheets attached

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

Debtor

(if known)

Type of Priority

Creditor's Name and Mailing Address Including Zip Code	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred, and Consideration for Claim	Contingent	Unliquidated	Disputed	Total Amount of Claim	Amount Entitled to Priority	Amount Not Entitled to Priority, If Any
Account Number: ZHDZDCCBP 3 RITA TAXES P.O. Box 94951 Cleveland, Ohio 44101-4951						287.00		
Account Number:								
Account Number:								
Account Number:								
Account Number:								
Account Number:								
Account Number:								
Subtotal (Total of this page)						\$287.00	\$0.00	\$0.00
Total  (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)						\$287.00		
Totals  (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)								

Sheet no. 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority Claims

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7

**Debtor**

(if known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint claim may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule G, Codebtors. If a joint debtor is the estate, state whether husband or wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", or "C" in the column labeled "Husband", "Wife", "Joint", or "Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

Creditor's Name and Mailing Address Including Zip Code, and Account Number	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 713315710 ARS Account Resolution 1801 NW 66th Ave Ste 200C Plantation, FL 33313	Ind	Nov 2012 Emergency Professionals		X		721.00
Account Number: 718646940 ARS Account Resolution 1801 NW 66th Ave Ste 200C Plantation, FL 33313	Ind	April 2013 Emergency Professionals		X		581.00
Account Number: Sadler O'Shaya Barbizon of Akron 3296 West Market Akron, OH 44333	Ind	7=8=08 Daughter Modeling Contract		X		1,595.00
Account Number: 43857377 Bureau of Collection Recovery P.O. Box 9001 Minnetonka, MN 55345-2338	Ind	2-12-10		X		774.00
Subtotal						\$3,671.00
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						

1 continuation sheets attached

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7

Debtor		(if known)				
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 516971222 CBE Group P.O. Box 126 Waterloo, IA 50704	Ind	Dec 2010 T-Mobile		X		1,659.00
Account Number: 01406300187 024233600 City of Cleveland Parking Violations Bureau P.O. Box 99939 Cleveland, OH 44199	Ind	2-27-2014 and 8-21-2014 parking tickets		X		135.00
Account Number: 2267543 Clear Dept CH 14365 Palatine, IL 60056-4365	Ind	April 2011 Internet Service		X		42.66
Account Number: 5000000005157 EDFinancial Services LLC 120 N Seven Oaks Dr Knoxville, TN 37922	Ind	August 2012		X		2,625.00
Account Number: 0500039784889 Dominion East Ohio P.O. Box 26785 Richmond, VA 23261	Ind	Sept 2011		X		8,129.42
Account Number: 78111095 and 661132 Drummond Financial Services 13216 Cedar Road Cleveland Hts, OH 44118	Ind	7-30-2013 and 8-7-2014 Auto Repossessions		X		2,025.00
Account Number: VB5880 First Federal Credit Control, Inc. 24700 Chagrin Blvd STE 205 Cleveland, Ohio 44122	Ind	Feb 2015 Univ Hosp Medical Group		X		384.00
Subtotal						\$15,000.08
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$18,671.08

Sheet no. 1 of 1 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

In Re: \_\_\_\_\_

Case No. 7

Debtor		(if known)				
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 7220275 and 7473716 First Credit P.O. Box 630838 Cincinnati, OH 45263-0838	Ind	July and September 2012 medical bill		X		689.00
Account Number: 517800631707 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104	Ind	Dec 2010 credit card		X		475.00
Account Number: 4030282620 First Merit Bank, NA 295 First Merit Circle Akron, OH 44307	Ind	1-14-14 Overdraft acct		X		-571.10
Account Number: xxxxxxx7092 H&R Block Bank P.O. Box 30040 Tampa, FL 33630-3040	Ind	1-15-13 credit card		X		942.44
Account Number: 43871931001 IC System Inc P.O. Box 64378 Saint Paul, MN 55164	Ind	April 2012 AT&T Utility		X		1,476.00
Account Number: 110064 010728 Illuminating Co. P.O. Box 3638 Akron, OH 444309-3638	Ind	March 2014 electric bill		X		3,070.23
Account Number: 110 101 381 959 Illuminating Co. P.O. Box 3638 Akron, OH 44309-3638	Ind	Feb 2014 electric bill		X		5,417.26
Subtotal						\$10,024.31
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$28,695.39

Sheet no. 2 of 2 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

Debtor		(if known)				
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 7723110100937505 Imagine Payment Processing P.O. Box 790193 St. Louis, MO 63179-0193	Ind	Jan 2010 Credit card		X		549.72
Account Number: 0094715981&0094715981 Jefferson Captial Systems 16McLeland Rd Saint Cloud, MN 56303	Ind	Feb 2010 and Mar 2010 Salute Gold credit card Imagine card		X		773.00
Account Number: 734169927 Midland Credit Management Inc. 8875 Aero Drive, Suite 200 San Diego, CA 92123	Ind	Feb 2014 T-Mobile		X		1,659.65
Account Number: C0766-1544 Midland Credit Management Inc 8875 Aero Drive, Suite 200 San Diego, CA 92123	Ind	Mar 2013 Aarons		X		788.61
Account Number: 4120614070168484 Merrick Bank P.O. Box 30537 Tampa, FL 33630-3537	Ind	August 2013 Credit card		X		700.80
Account Number: 11JI7107 Morgan&Pottinger, PSC Attorneys at Law 2401 Stanley Gault Parkway Louisville, Kentucky 40223	Ind	Feb 2013 Jefferson Capital Systems Inc		X		549.24
Account Number: Inv No 574 Paulette F. Balin & Assoc Attorneys and Counselors At Law 7372 Lakeshore Blvd Mentor, OH 44060	Ind	Oct 2008		X		288.38
Subtotal						\$5,309.40
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$34,004.79

Sheet no. 3 of 3 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

In Re: \_\_\_\_\_

Case No. 7

Debtor		(if known)				
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 0010803945 RGS Fomamcoa; P.O. Box 1022 Wixom, MI 48363-1022	Ind	Feb 2013 Bally Total Fitness		X		715.68
Account Number: Case No. CVG 550 South Euclid Municipal Court 1349 South Green Rd South Euclid, OH 44121	Ind	Jan 2014 South Euclid Muni Court Pltf Peter Suhodolsky		X		1,557,68
Account Number: 417115 TSI Telephone Company P.O. Box 247168 Columbus, OH 43224	Ind	Jan 2011 telephone company		X		56.59
Account Number: 240927823 Time Warner Cable P.O. Box 0901 Carol Stream, IL 60132-0901	Ind	Feb 2014 cable		X		168.63
Account Number: 6585 United Consumer Financial 865 Bassett Rd Westlake, OH 44145	Ind	April 2013 JP Morgan Chase Bank		X		1,921.00
Account Number: 34003624 UH Case Medical Center P.O. Box 94564 Cleveland, OH 44194	Ind	Feb 2012 medical bill		X		127.00
Account Number: 3909620 UH Case Medical Center P.O. Box 95464 Cleveland, Ohio 44194	Ind	March 2013 medical bill		X		115.00
Subtotal						\$158,871.90
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$192,876.69

Sheet no. 4 of 4 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

In Re: \_\_\_\_\_

Case No. \_\_\_\_\_ 7 \_\_\_\_\_

Debtor		(if known)				
Creditor's Name and Mailing Address Including Zip Code, and Account Number	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 5372504 Univ Hospital Lab Serv Foundation P.O. Box 901967 Cleveland, Ohio 44120-1967	Ind	Feb 2008 medical bill		X		173.68
Account Number: 9033833 Univ Hospital Lab Serv Foundation P.O. Box 901967 Cleveland, Ohio 44120-1967	Ind	Mar 2013 medical bill		X		171.47
Account Number: 3531779 UH Case Medical Center P.O. Box 94564 Cleveland, OH 44194-4564	Ind	Nov 2012 medical bill		X		159.00
Account Number: 02359789 University Hospital Medical Group P.O. Box 74116 Cleveland, Ohio 44104-4116	Ind	Nov 2008 medical bill		X		102.00
Account Number: 34066441 General Revenue Corp. 4660 Duke Dr #300 Mason, OH 45040	Ind	2015 loan		X		1,273.46
Account Number: 012673994 WOW Internet Cable P.O. Box 4350 Carol Stream, IL 60197-4350	Ind	March 2015 cable		X		571.22
Account Number: 53101 Arrow Landscaping & Construction 312 Richmond Rd Richmond Hts., OH 44143		September 2013 lawncare		X		108.00
Subtotal						\$2,558.83
Total (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$195,435.52

Sheet no. 5 of 5 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims



In Re: \_\_\_\_\_

**Debtor**

Case No. \_\_\_\_\_

7  
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.**DEMO**

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State Whether Lease is for Nonresidential Real Property. State Contract Number of Any Government Contract
<b>DEMO</b>	

In Re: \_\_\_\_\_

**Debtor**

Case No. \_\_\_\_\_

7  
(if known)**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardians, such as "J.B., a minor child, by John Doe guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Federal Bankruptcy Rule 1007(d).

☒ Check this box if debtor has no codebtors.

Name and Mailing Address of Codebtor	Name and Mailing Address of Creditor
DEMO	
DEMO	

**Fill in this information to identify your case:**

Debtor 1 JAZZMA  DICKINSON  
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number  
(If known) \_\_\_\_\_

Check if this is:

☐ An amended filing☐ A supplement showing post-petition  
Chapter 13 income as of the following date:\_\_\_\_\_  
M / DD / Y

Official Form B 6I

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**☐ Employed  
☐ Not employed☐ Employed  
☐ Not employed**Occupation****Employer's name****Employer's address**

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

**How long employed there?****Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2.

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**3. Estimate and list monthly overtime pay.**

3.

+ \$ \_\_\_\_\_

+ \$ \_\_\_\_\_

**4. Calculate gross income.** Add line 2 + line 3.

4.

\$ \_\_\_\_\_ 0.00

\$ \_\_\_\_\_ 0.00

For Debtor 1

For Debtor 2 or  
non-filing spouse

Copy line 4 here ..... → 4. \$ 0.00 \$ 0.00

## 5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions 5a. \$ \$  
 5b. Mandatory contributions for retirement plans 5b. \$ \$  
 5c. Voluntary contributions for retirement plans 5c. \$ \$  
 5d. Required repayments of retirement and loan 5d. \$ \$  
 5e. Insurance 5e. \$ \$  
 5f. Domestic support obligations 5f. \$ \$  
 5g. Union dues 5g. \$ \$  
 5h. Other deductions. Specify: 5h. + \$ + \$

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$ 0.00 \$ 0.00

7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ \$

## 8. List all other income regularly received:

## 8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a. \$ \$

## 8b. Interest and dividends 8b. \$ \$

## 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c. \$ 140.00 \$

## 8d. Unemployment compensation 8d. \$ \$

## 8e. Social Security 8e. \$ \$

## 8f. Other government assistance that you regularly receive

Include cash assistance and the value (known as) of any in-kind assistance that you receive, such as food stamps, benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  
Specify: SEC 8:799.00 FOOD STAMPS 87 HUT TIE 54.00

8f. \$ 24.00 \$

8g. Pension or retirement income 8g. \$ \$

8h. Other monthly income. Specify: 8h. + \$ + \$

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$ 1,864.00 \$ 0.00

## 10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ 1,864.00 + \$ = \$ 1,864.00

## 11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: 11. + \$

## 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

12. \$ 1,864.00

Combined  
monthly income

## 13. Do you expect an increase or decrease within the year after you file this form?

☐ No.☐ Yes. Explain:

Fill in this information to identify your case:

Debtor 1 JAZZMA    
First Name Middle Name Last Name

Debtor 2  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO

Case number  
(if known) \_\_\_\_\_

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date: \_\_\_\_\_  
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If you and your spouse are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☒ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

DAUGHTER 16

DAUGHTER 14

DAUGHTER 13

DAUGHTER 10

- ☐ No
- ☒ Yes
- ☐ No
- ☒ Yes
- ☐ No
- ☒ Yes
- ☐ No
- ☒ Yes
- ☐ No
- ☒ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 799.00

If not included in line 4:

4a. Real estate taxes 4a. \$ 0

4b. Property, homeowner's, or renter's insurance 4b. \$ 0

4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0

4d. Homeowner's association or condominium dues 4d. \$ 0

	5	6a	6b	6c	6d	7	8	9	10	11	12	13	14	15a	15b	15c	15d	16	17a	17b	17c	17d	18	19	20a	20b	20c	20d	20e
<b>Your expenses</b>																													
5. Additional mortgage payments for your residence, such as home equity loans	\$	0																											
<b>6. Utilities:</b>																													
6a. Electricity, heat, natural gas	\$	54.00																											
6b. Water, sewer, garbage collection	\$																												
6c. Telephone, cell phone, Internet, satellite, and cable services	\$	50.00																											
6d. Other. Specify: CABLE/INTERNET	\$	60.00																											
7. Food and housekeeping supplies	\$	900.00																											
8. Childcare and children's education costs	\$	0																											
9. Clothing, laundry, and dry cleaning	\$	60.00																											
10. Personal care products and services	\$	200.00																											
11. Medical and dental expenses	\$	0																											
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	\$	160.00																											
13. Entertainment, clubs, recreation, newspapers, magazines, and books	\$	100.00																											
14. Charitable contributions and religious donations	\$	0																											
<b>15. Insurance.</b>																													
Do not include insurance deducted from your pay or included in lines 4 or 20.																													
15a. Life insurance	\$	0																											
15b. Health insurance	\$	0																											
15c. Vehicle insurance	\$	0																											
15d. Other insurance. Specify:	\$																												
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	\$																												
<b>17. Installment or lease payments:</b>																													
17a. Car payments for Vehicle 1	\$																												
17b. Car payments for Vehicle 2	\$																												
17c. Other. Specify:	\$																												
17d. Other. Specify:	\$																												
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	\$																												
19. Other payments you make to support others who do not live with you. Specify:	\$																												
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>																													
20a. Mortgages on other property	\$																												
20b. Real estate taxes	\$																												
20c. Property, homeowner's, or renter's insurance	\$																												
20d. Maintenance, repair, and upkeep expenses	\$																												
20e. Homeowner's association or condominium dues	\$																												

21. **Other.** Specify: \_\_\_\_\_

21. +\$ \_\_\_\_\_

22. **Your monthly expenses.** Add lines 4 through 21.  
The result is your monthly expenses.

22. \$ 2,383.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 0.00

23b. Copy your monthly expenses from line 22 above.

23b. - \$ 2,383.00

23c. Subtract your monthly expenses from your monthly income.  
The result is your *monthly net income*.

23c. \$ -2,383.00

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☐ Yes.

Explain here:

DEMO

Debtor

(if known)

**DECLARATION CONCERNING DEBTOR(S) SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 2), and that they are true and correct to the best of my knowledge, information, and belief.

Date

**DEMO** JAZMINA DICKINSON  
Signature of Debtor

Date

Signature of Joint Debtor

\* \* \* \* \*

**DECLARATION AND SIGNATURE OF BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required under that section; and (4) I will not accept any additional money or other property from the debtor before the filing fee is paid in full.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social-Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social-security number of the officer, principal, responsible person or partner who signs this document.*

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of Title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

\* \* \* \* \*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, \_\_\_\_\_ named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary of schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date

Signature of Authorized Individual

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.



**FORM 7. STATEMENT OF FINANCIAL AFFAIRS**

**UNITED STATES BANKRUPTCY COURT**

**NORTHERN District of OHIO**

In Re: \_\_\_\_\_ Case No. 7

Debtor \_\_\_\_\_ (if known)

**DEMO**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfer and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. **If the answer to an applicable question is "None", mark the box labeled "None".** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

**DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or partner; officers, directors, and any persons in control of a corporate debtor and the relatives and affiliates of the debtor and officers and directors of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

None ☐ **1. Income from employment or operation of business**

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Amount	Source
2014 15,000.00	M&M&C DIVERSIFIED P.O. BOX 21406 CLEVE, oh 44121
2013 15,000.00	M&M&C DIVERSIFIED P.O. BOX 21406 CLEVE, OH 44121

**2. Income other than from employment or operation of business**

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Amount

Source

# DEMO

**3. Payments to creditors**

None ☐ **Complete a. or b., as appropriate, and c.**

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, [except for a debt on account of a domestic support obligation,] made within 90 days immediately preceding the commencement of this case. Indicate with an \* any payments that were made to the creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor	Dates of Payments	Amount Paid	Amount Still Owing
LANDLORD	1ST OF MONTH	799.00	

# DEMO

None ☒ b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case that has the aggregate value of any property that constitutes or is affected by such transfer is less than \$6.25. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor	Dates of Payments/ Transfers	Amount Paid or Value of Transfers	Amount Still Owing
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None ☒ c. All debtors: List all payment made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor and Relationship to Debtor	Date of Payment	Amount Paid	Amount Still Owing
LANDLORD	1ST OF MONTH	799.00	

DEMO

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None ☒ a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Caption of Suit and Case Number	Nature of Proceeding	Court or Agency and Location	Status or Disposition
Case No. 2013 CVG 550 Peter Suhodolsky vs Jazzma Dickinson Case No. 08CVI00500 Kamco Financial vs Jazzma Dickinson	proc civil claim judgment	DEMO SOUTH BEDFORD MUNICIPAL COURT BEDFORD MUNICIPAL COURT	judgment \$1,557.00  judgment entry \$280.00

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person for Whose Benefit Property was Seized	Date of Seizure	Description and Value of Property
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# DEMO

## 5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor or Seller	Date of Repossession, Foreclosure Sale, Transfer or Return	Description and Value of Property
---	--	--------------------------------------

# DEMO

# 6. Assignments and receiverships

- None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address  
of Assignee

Date of  
Assignment

Terms of Assignment  
or Settlement

DEMO

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address  
of Custodian

Name and Location of Court  
Case Title & Number

Date of Order

Description and  
Value of Property

DEMO

**7. Gifts**

- None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person or Organization	Relationship to Debtor, if any	Date of Gift	Description and Value of Gift
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# DEMO

**8. Losses**

- None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Description and Value of Property	Description of Circumstances and, if Loss was Covered in Whole or in Part by Insurance, Give Particulars.	Date of Loss
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**9. Payments related to counseling, bankruptcy**

- None ☐ List all payments made or property transferred by either or both of the debtor to any person, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy laws, or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

Name and Address of Payee	Date of Payment, Name of Payor if other than Debtor	Amount of Money or Description and Value of Property
DEBBIE K. HORTON, ATTORNEY P.O. BOX 39261 SOLON, OHIO 44139	APRIL 2015	500.00

# DEMO

**10. Other transfers**

- None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Transferee,  
Relationship to Debtor

Date

Describe Property Transferred  
and Value Received

# DEMO

- None ☒ b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

Name of Trust or Other Device

Date(s) of Transfer(s)

Amount of Money or Description and Value  
of Property or Debtor's Interest in Property

# DEMO

**11. Closed financial accounts**

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address  
of Institution

Type of Account, Last Four  
Digits of Account Number,  
and Amount of Final Balance

Amount and Date of  
Sale or Closing

**12. Safe deposit boxes**

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Bank  
or Other DepositoryNames and Addresses of those with  
Access to Box or Depository

Description of Contents

Date of Transfer  
or Surrender, if any

# DEMO

**13. Setoffs**

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor

Date of Setoff

Amount of Setoff

# DEMO

**14. Property held for another person**

None ☒ List all property owned by another person that the debtor holds or controls.

Name and Address of Owner

Description and Value of Property

Location of Property



**15. Prior address of debtor**

None ☐ If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

Address	Name Used	Dates of Occupancy
MOSLEY SUITES WICKLIFFE, OHIO	JAZZMA DICKINSON	NOV 2013-MARCH 2014
1850 E. 186TH STR CLEVE, OH	JAZZMA DICKINSON	MARCH 2008 - MARCH 2013
4201 WILMINGTON RD S. EUCLID, OH	JAZZMA DICKINSON	AUGUST 2013-SEPT 2013

# DEMO

# DEMO

**16. Spouses and former spouses**

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

Name

# 17. Environmental information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None ☒ a. List the name and address of every site at which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law
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- None ☒ b. List the name and address of every site at which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law
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- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

Name and Address of Governmental Unit	Docket Number	Status or Disposition
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**18. Nature, location and name of business**

- None ☒ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was a self-employed in a trade, profession, or other activity either full- or part-time within the six-years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

Name, Address, Last Four Digits of Soc. Sec. No.  
Complete EIN or Other Taxpayer I.D. No.

Nature of Business

Beginning and  
Ending Dates

DEMO

- None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

Name

Address

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

- None ☒ a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of this debtor.

Name and Address

Dates Services Rendered

DEMO

- None ☒ b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of this debtor.

Name and Address

Dates Services Rendered

- None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account or records are not available, explain.

Name and Address

DEMO

- None ☒ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the two years immediately preceding the commencement of this case by the debtor.

Name and Address

Date Issued

**20. Inventories**

- None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

Date of Inventory

Inventory Supervisor

Amount of Inventory  
(Specify cost, market or other basis)

DEMO

- None ☒ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

Date of Inventory

Name and Address of Custodian of Inventory Records

**21. Current Partners, Officers, Directors and Shareholders**

- None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

Name and Address

Nature of Interest

Percentage of Interest

DEMO

- None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting securities of the corporation.

Name and Address

Title

Nature and Percentage  
of Stock Ownership

**22. Former partners, officers, directors and shareholders**

None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

Name and Address

Date of Withdrawal

# DEMO

None ☒ b. If the debtor is a corporation, list all officers, directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

Name and Address

Title

Date of Termination

**23. Withdrawals from a partnership or distributions by a corporation**

None ☒ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

Name and Address of Recipient,  
Relationship to Debtor

Date and Purpose of Withdrawal

Amount of Money  
and Value of Property

# DEMO

**24. Tax consolidation group**

None ☒ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of this case.

Name of Parent Corporation

Taxpayer Identification Number

**25. Pension funds**

None ☒ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of this case.

Name of Pension Fund

Taxpayer Identification Number

[If completed by an individual or individual and spouse.]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

\_\_\_\_\_  
Date

X /S/ JAZZMA DICKINSON  
Signature of Debtor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Joint Debtor

DEMO

[If completed on behalf of a partnership or corporation]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Signature of Authorized Individual

\_\_\_\_\_  
Printed Name and Title

**DECLARATION AND SIGNATURE OF BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required under that section; and (4) I will not accept any additional money or other property from the debtor before the filing fee is paid in full.

\_\_\_\_\_  
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

\_\_\_\_\_  
Social-Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social-security number of the officer, principal, responsible person or partner who signs this document.*

\_\_\_\_\_  
\_\_\_\_\_  
Address

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

\_\_\_\_\_  
Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of Title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN District of OHIO**

In Re: \_\_\_\_\_  
**Debtor**

Case No. 7  
 (if known)

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

PART A - Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages, if necessary.)

Property No. 1	
<b>Creditor's Name:</b> NONE	<b>Describe Property Securing Debt:</b>
<p>Property will be (check one):</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Surrendered         <input type="checkbox"/> Retained       </div> <p>If retaining the property, I intend to (check at least one):</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Redeem the property         <input type="checkbox"/> Reaffirm the debt         <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).       </div> <p>Property is (check one):</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Claimed as exempt         <input type="checkbox"/> Not claimed as exempt       </div>	

Property No. 2 (if necessary)	
<b>Creditor's Name:</b>	<b>Describe Property Securing Debt:</b>
<p>Property will be (check one):</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Surrendered         <input type="checkbox"/> Retained       </div> <p>If retaining the property, I intend to (check at least one):</p> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Redeem the property         <input type="checkbox"/> Reaffirm the debt         <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).       </div> <p>Property is (check one):</p> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> Claimed as exempt         <input type="checkbox"/> Not claimed as exempt       </div>	



PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attached additional pages if necessary.)

Property No. 1		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No. 3 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

\_\_\_\_\_  
Date

\_\_\_\_\_  
/S/ JAMES A. DICKINSON  
Signature of Debtor

\_\_\_\_\_  
X  
Signature of Joint Debtor

Debtor

(if known)

**UNITED STATES BANKRUPTCY COURT**  
**NORTHERN District of OHIO**

**STATEMENT**  
**Pursuant to Rule 2016(b)**

1. Pursuant to 11 U.S.C. § 329(e) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that the compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with this bankruptcy case is as follows:

For legal services I have agreed to accept	\$	450.00
Prior to the filing of this statement I have received	\$	335.00
Amount of filing fee in this case paid	\$	335.00
Balance Due	\$	0

2. The source of the compensation paid to me was:

☒ Debtor(s) ☐ Other (Specify: )

3. The source of the compensation to be paid to me is:

☒ Debtor(s) ☐ Other (Specify: )

4. ☒ I have not agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- ☒ Analysis of the debtor(s) financial situation, and rendering advice to the debtor(s) in determining whether to file a petition in bankruptcy under title 11 of the United States Code.
- ☒ Preparation and filing of any petition, schedules, statements, and plan which may be required.
- ☒ Representation of the debtor(s) at the meeting of creditors.
- ☒ Negotiation of reaffirmation or surrender of secured collateral.
- ☐
- ☐

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  
 post and/or adversarial hearings

/s/ DEBBIE K. HORTON

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

\_\_\_\_\_  
 Date

X /S/ DEBBIE K. HORTON  
 \_\_\_\_\_  
 Signature of Attorney

UNITED STATES BANKRUPTCY COURT  
NORTHERN District of OHIO

In Re: \_\_\_\_\_ Case No. 7  
Debtor (if known)

**DEMO**  
VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of sheet(s) is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

\_\_\_\_\_  
Date /S/ DEBBIE K. HORTON  
Signature of Attorney

\_\_\_\_\_  
/S/ JAZZMA DICKSON  
Signature of Debtor Signature of Joint Debtor

\_\_\_\_\_  
Signature of Authorized Individual